

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: HARBOR HOUSE (0010203)

Address: 4600 52ND AVE, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 04/01/2004

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095686 **End Date:** 10/05/2005 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092374 **End Date:** 04/08/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Survey ID: 0092196 **End Date:** 02/24/2004 **Type:** OTHER **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008968 Served 03/25/2004

Deficiencies Cited
83.41(9)

Subject Area
CLEANLINESS OF ROOMS

Compliance
Verified
10/03/2005

Corrected
Yes

Survey ID: 0091158 **End Date:** 10/02/2003 **Type:** INITIAL **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 03/28/2005

Date Investigation Completed: 10/05/2005

Subject Area(s)
MEDICATIONS

Result
NOT SUBSTANTIATED

SOD #

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